(1)	(2)	(3)
(1)	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$231,115,953	-0.3%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain  If so, specify: No	territory (territories)or	certain classes?
Brief description of filing. (If organization, specify organization overall rate level change of -0.3 (AI) Owners program. This change Town Class factors for Homeowners revised package premiums.	<ul><li>n): With this filing, Alls for the Illinois Allstat will be applied through t</li></ul>	tate is proposing an e Indemnity Company he modification of
* Adjusted to reflect all prior :  ** Change in Company's premium le- result from application of new	vel which will	
		_
	Allstate Indemnity	
	Name of Compar	ny
	Andi M. Coloni . Stata Filinga	Project Manager
	Andi M. Colosi – State Filings Official - Tit	

H29219D

Change in Company's premiur revision effective 10-1-10	n or rate level produced	by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	<pre>Volume (Illinois)*</pre>	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
<del>-</del>		
7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
11. Inland Marine	\$1.41.500.952	-0.2%
12. Homeowners	\$141,599,852	-0.276
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		<del></del>
Does filing only apply to certain If so, specify: No	territory (territories)or	c certain classes?
Brief description of filing. (If organization, specify organization overall rate level change of -0.2% (AIC) Owners program. This change Town Class factors for Homeowners revised package premiums. Please and rates for more information about the Adjusted to reflect all prior result from application of new	a): With this filing, Alls for the Illinois Allsta will be applied through and Deluxe Plus Homeowne refer to the attached fixed this change rate changes.	state is proposing an te Insurance Company the modification of rs, which result in
	Allstate Insurance	
	Name of Compa	iny

Andi M. Colosi - State Filings Project Manager
Official - Title

H29219D

Change i	n Company's	premium	or	rate	level	produced	by	rate
revision	effective	10-11-10						

Change in Company's premi revision effective 10-11-1	um or rate level produced b	oy rate
(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
Coverage	Volume (Illinois)*	Change (+ OI -)
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety 8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	007.104.004	-0.3%
12. Homeowners	\$27,126,826	-0.3%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: No	n territory (territories)or	certain classes?
-		
Brief description of filing. (I organization, specify organizati overall rate level change of -0. Casualty Insurance Company (APC)	on): With this filing, Alls 3% for the Illinois Allstat Owners program. This char	state is proposing an ce Property and

through the modification of Town Class factors, the Secondary Residence factor, and the Fire Resistive Discount factor for Homeowners and Select Homeowners.

- \* Adjusted to reflect all prior rate changes. \*\* Change in Company's premium level which will result from application of new rates.

Allstate Property & Casualty Insurance Company
Name of Company
Andi M. Colosi - State Filings Project Manager
Official - Title

H29219D

# Section 754.EXHIBIT A Summary Sheet (Form RF-3)

# FORM (RF-3)

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto	***************************************	
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire	**************************************	
Extended Coverage		
Inland Marine		
Homeowners	53,906	+5.9%
Commercial Multi-Peril	33,300	+3.976
Crop Hail		
Other		
Life of Insurance		<u></u>
Life of mourance	•	
Does filing only apply to certa Classes? If so,	in territory (territories) o	r certain
specify: No		
specify.		
Brief description of filing. (If f	iling follows rates of an	advison
Organization, specify	ining follows rates of arra	advisory
organization):	Introducing prior clain	ns and age of insured factors.
Expanding maximum coverage A li		
Implementing optional ID Theft an		
*Adjusted to reflect all prior ra		
**Change in Company's prem		ult from application of nev
rates.		an norm approaudit of not
14(03.	American Hallmai	rk Insurance Co of TX
		ame of Company
		Senior Product Manager

### Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Cha	ange in Company's premium or rate lev	rel produced by rate revision effective	11/15/10 New and 12/17/2010 Ren
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
	Inland Marine		
12.	Homeowners	\$8,925,487	4.7%
13.	Commercial Multi-Peril		
14.	Crop Hail		
	Other		
	Line of Insurance		
	es filing only apply to certain territory (t the remainder of the changes associated with the	erritories) or certain classes? If so, specify his filing apply to all territories.	No. This filing applies to all territories.
		ates of an advisory organization, specify of 15% deductible factor and 5 Mine Subsidence endor	
	ljusted to reflect all prior rate changes. hange in Company's premium level w	nich will result from application of new rate	S.
		Citizens In	surance Company of America
			Name of Company
		Mandi Al-Bei	ik - Associate State Filing Analyst
			Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	inge in Company's premium or rate lev	vel produced by rate revision effective	11/15/10 New and 12/17/2010 Ren
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
11.	Inland Marine		
	Homeowners	\$5,557,993	0.0%
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	es filing only apply to certain territory (	territories) or certain classes? If so, spec	ify: No. This filing applies to all territories.
		rates of an advisory organization, specify	
back	cup limits for Owners forms, revising earthquake	15% deductible factor and 5 Mine Subsidence ende	prsement rates.
	ljusted to reflect all prior rate changes. hange in Company's premium level wl	hich will result from application of new ra	tes.
		Citiza	ns Insurance Company of Illinois
		Citiza	Name of Company
		Mandi Al-	Beik - Associate State Filing Analyst

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	10/03/2010 New & 09/03/2010 Ren
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage		
۷.	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage Inland Marine		
	Homeowners	\$5,557,993	0.0%
	Commercial Multi-Peril	40,007,000	
	Crop Hail		
	Other		
	Line of Insurance		
_			
Do	es filing only apply to certain territory (1	erritories) or certain classes? If so, specify:	Territory change on territory 20 only.
	ef description of filing. (If filing follows r itory Factor change only.	ates of an advisory organization, specify orga	anization):
	ljusted to reflect all prior rate changes. hange in Company's premium level wl	nich will result from application of new rates.  Citizens Ins	urance Company of Illinois
			me of Company
			Accorded Otata Filippo Amelicat
			Associate State Filing Analyst Official – Title
			Omolai - rille

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	07/12/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$5,557,993	2.8%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Dog	es filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	
	No territorial restriction; Applies to customers w	hose auto policy is with Hanover and whose prior home	owner's policy was continually
	with the prior carrier for 2 or more years.		·
		ates of an advisory organization, specify orga	
		e guide to include a new Partner Advantage Discount. T	he discount may be applied when
the r	named insured or spouse's prior homeowner insu	rance is with a specified carrier.	
	justed to reflect all prior rate changes.		
**C	hange in Company's premium level wh	ich will result from application of new rates.	
			surance Company of Illinois
		N	ame of Company
		Mandi Al-Beik	- Associate State Filing Analyst
			Official - Title

New Business Change only

(	Change in Company's premium or ra	ate level produced by rate revision effect	tive 8/16/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		RECEIVED
	Commercial		POEIVED
3.	Liability Other Than Auto		KEU
4.	Burglary and Theft		
5.	Glass		AUG 2 5 2010
6.	Fidelity		AUG 2 5 EV
7.	Surety		- INOIS
8.	Boiler and Machinery		STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD
9.	Fire		DEPARTMENT OF THE
10.	Extended Coverage		SPKINO.
11.	Inland Marine		0.00/
12.	Homeowners	-2,641	-0.2%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does 1 Appl	filing only apply to certain territory (ies to all territories and classes.	(territories) or certain classes? If so, spe	cify:
Expa * A	djusted to reflect all prior rate chang		ecify organization): ecial Form.
	hange in Company's premium level sult from application of new rates.	which will	
		F	armers Insurance Exchange
		<del></del>	Name of Company
		<u>_J</u> .	osh Davis - Product Manager
			Official Title

ange	in Company's premium or rate level	produced by rate revision effective	08/10/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	-	
5. 6.	Glass		
o. 7.	Fidelity Surety		
7. 8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$ 986,322	4.3 %
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
)000 f	filing only apply to certain territory (	torritories) or cortain classes? If so	enecify
			change applies only to policies insuring
	s with fiberglass shingle roofs.	olo. I looigiass shingle loof labtor	ominge approx only to ponetes insuring
	description of filing. (If filing followed Base Rates and factor for Fibergla		i, specify organization):
		<del></del>	
	djusted to reflect all prior rate chang hange in Company's premium level v		
	sult from application of new rates.	which will	
10	suit from application of new faces.		
			Garrison Property And Casualty Insurance Company
			Name of Company
			Tomas of Joinpuny
			Michael Folor Lawrence
			Michael Foley – Insurance Compliance
			Official - Title

### Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	11/15/10 New and 12/17/2010 Refi
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage     Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$673,440	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Ellio or modification		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	No. This filing applies to all territories.
zeee ming only apply to contain terms.	,	
Brief description of filing. (If filing follows	rates of an advisory organization, specify orga	anization): Introducing additional water
backup limits for Owners forms, revising earthquak	e 15% deductible factor and 5 Mine Subsidence endorses	ment rates.
*Adjusted to reflect all prior rate changes	<b>.</b>	
**Change in Company's premium level w	hich will result from application of new rates.	
	Hand	ver Insurance Company
		Name of Company
	Mandi Al-Bei	k - Associate State Filing Analyst
		Official – Title

Official - Title

	Change in Company's premium or i	rate level produced by rate revision effec	tive <u>8/16/2010</u>
	(1)	(2)	(3)
	Coverage	Annual Premium <u>Volume (Illinois)*</u>	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		RECEIVED
	Private Passenger		., CEIVEL
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		AUG 2 5 2010
5.	Glass		
6.	Fidelity		STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD
7.	Surety		DEPARTMENT OF INCIS
8.	Boiler and Machinery		SPRINGFIELD SPRINGE
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	-268,293	-0.2%
13.	Commercial Multi-Peril	200,270	
14.	Crop Hail		
15.	Other		
15.	Line of Insurance		
	filing only apply to certain territory lies to all territories and classes.	(territories) or certain classes? If so, spe	ecify:
* A	ansion of AutoHome Discount for li		ecify organization): ecial Form.
re	esult from application of new rates.		
			Ilinois Farmers Insurance Company
			Name of Company
		1	osh Davis - Product Manager

# **ILLINOIS DEPARTMENT OF INSURANCE**

#### **SUMMARY SHEET**

12/1/10

Change in Company's premium or rate level produced by rate revision effective		+6.8%	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
10.	Extended Coverage		
11.	Inland Marine		
	Homeowners	\$58,396	6.8%
	Commercial Multi-Peril		
	Crop Hail		
15.	. Other Line of Insurance		
	Line of insurance		
Dο	es filing only apply to certain territory (	(territories) or certain classes? If so, specify	<i>r</i> :
	plies to all Territories	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,			
Bri	ef description of filing. (If filing follows	rates of an advisory organization, specify o	rganization):
Ra	te increase of 6.8% for all territories in	ncludes increased Base Rates of 8% for all	I territories along with a 10% decrease
in	the Platinum and Gold package cos	ts. Also included in this filing are the nev	v 10% tier for our Multi-Policy credit,
rer	noval of Dwelling Under Construction	n and Incidental Farming Persona Liabili	ty coverages, implementation of UW
		s.", more than 2 dogs, and trampolines,	as well as modifying our occupancy
<u>sui</u>	rcharge to apply to dwellings with 2 un	its.	
	djusted to reflect all prior rate changes Change in Company's premium level w	s. hich will result from application of new rate	s.
		Drootor	ian Incurance Company
		Praetor	ian Insurance Company Name of Company
			name of company
		Virignia Putzu -	Rate/Form Implementation Lead
			Official Title

# Section 754.EXHIBIT A Summary Sheet (Form RF-3)

# FORM (RF-3)

Change in Company's premium or rate	level produced by rate revision
effective 09/11/2010	

± -	(1)	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Coverage	Volume (minois)	Change (101-)
١.	Passenger		
	Commercial		
2	Automobile Physical Damag		
_	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
3. 3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
). 9.	Fire	V-1/2/2	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$30,864,387	0
13.	Commercial Multi-Peril	Ψ30,004,307	
14.	Crop Hail	**************************************	
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If f Organization, specify organization): Nothing has changed from our pre	We are introducing Bo	ook Transfer Rate Stabilization.
	*Adjusted to reflect all prior ra **Change in Company's premates.		ılt from application of new
	เดเธอ.	Safeco Insurance	Company of Illinois
			me of Company
		Craig Beeson - Pr	•
			Official – Title

hange	in Company's premium or rate level p	produced by rate revision effective	08/10/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
<i>3</i> .	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$ 27,440,868	12.8 %
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (to		
		ers. Fiberglass shingle roof factor of	change applies only to policies insuring
home	s with fiberglass shingle roofs.	·	
	description of filing. (If filing follows		specify organization):
Revis	ed Base Rates and factor for Fiberglas	s sningle root.	
* A	djusted to reflect all prior rate change	c	
	hange in Company's premium level w		
	esult from application of new rates.		
			United Services Automobile
			Association
			Name of Company
			Michael Foley – AVP Insurance
			Compliance
			Official - Title

hange	in Company's premium or rate level p	produced by rate revision effective	08/10/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety	4	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$ 20,451,876	4.2 %
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
Base I			o, specify: change applies only to policies insuring
nomes	s with fiberglass shingle roofs.		
	description of filing. (If filing followed Base Rates and factor for Fibergla		n, specify organization):
* A ** C	djusted to reflect all prior rate change hange in Company's premium level versult from application of new rates.	es.	
			USAA Casualty Insurance
			Company
			Name of Company
			Michael Foley – AVP Insurance
			Compliance
			Official - Title

hange	in Company's premium or rate level pr	oduced by rate revision effective	08/10/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$ 503,759	-2.7 %
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
Base !		rritories) or certain classes? If so s. Fiberglass shingle roof factor	, specify: change applies only to policies insuring
nome	s with fiberglass shingle roofs.		
	description of filing. (If filing follows ed Base Rates and factor for Fiberglass		, specify organization):
* A ** C	djusted to reflect all prior rate changes hange in Company's premium level where the sult from application of new rates.	•	
			USAA General Indemnity
			Company
			Name of Company
			Michael Foley – AVP Insurance
			Compliance
			Official - Title